

Small PHA Plan Update
Annual Plan for Fiscal Year: 2002

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH
INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES**

**PHA Plan
Agency Identification**

PHA Name: Housing Authority of Greenville

PHA Number: KY100

PHA Fiscal Year Beginning: (mm/yyyy) 04/2002

PHA Plan Contact Information:

Name: Brent Miller, Executive Director

Phone: 270-338-5900

TDD: 1-800-648-6056 (typed) or 6057 (voice)

Email (if available): gha@muhlon.com

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting:
(select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at: (select all that apply)

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ Main administrative office of the local, county or State government
- ☐ Public library
- ☐ PHA website
- ☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
- ☐ PHA development management offices
- ☐ Other (list below)

PHA Programs Administered:

☐ Public Housing and Section 8 ☐ Section 8 Only ☒ Public Housing Only

Annual PHA Plan
Fiscal Year 2002
[24 CFR Part 903.7]

i. Table of Contents

Provide a table of contents for the Plan, including attachments, and a list of supporting documents available for public inspection. For Attachments, indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

Contents	<u>Page #</u>
Annual Plan	
i. Executive Summary (optional)	
ii. Annual Plan Information	
iii. Table of Contents	
1. Description of Policy and Program Changes for the Upcoming Fiscal Year	4
2. Capital Improvement Needs	4-5
3. Demolition and Disposition	5
4. Homeownership: Voucher Homeownership Program	5-6
5. Crime and Safety: PHDEP Plan	6
6. Other Information:	
A. Resident Advisory Board Consultation Process	6
B. Statement of Consistency with Consolidated Plan	7
C. Criteria for Substantial Deviations and Significant Amendments	7-8
Attachments	
<input checked="" type="checkbox"/> Attachment A : Supporting Documents Available for Review	
<input checked="" type="checkbox"/> Attachment B : Capital Fund Program Annual Statement	
<input checked="" type="checkbox"/> Attachment C : Capital Fund Program 5 Year Action Plan	
<input type="checkbox"/> Attachment __: Capital Fund Program Replacement Housing Factor Annual Statement	
<input type="checkbox"/> Attachment __: Public Housing Drug Elimination Program (PHDEP) Plan	
<input checked="" type="checkbox"/> Attachment D : Resident Membership on PHA Board or Governing Body	
<input checked="" type="checkbox"/> Attachment E : Membership of Resident Advisory Board or Boards	
<input type="checkbox"/> Attachment __: Comments of Resident Advisory Board or Boards & Explanation of PHA Response (must be attached if not included in PHA Plan text)	
<input checked="" type="checkbox"/> Other (List below, providing each attachment name)	
Required Attachment F. Deconcentration Policy Information	
Required Attachment G. Voluntary Conversion Information	
Required Attachment H. Capital Fund Program Performance & Evaluation Reports	
Required Attachment I. Report on the Progress in Meeting the Five-Year Mission/Goals	

ii. Executive Summary

1. Summary of Policy or Program Changes for the Upcoming Year

In this section, briefly describe changes in policies or programs discussed in last year's PHA Plan that are not covered in other sections of this Update.

There are no major changes in policies or procedures contemplated during the upcoming Agency Plan year. The Housing Authority of Greenville (HAG) will continue to try to implement the Community Services requirements for applicable adult residents. It will also seek to attract and retain additional residents (to fill the existing vacancies), particularly working families. It will continue its five-year Capital Fund Program activities including those funded in FFY2000 and 2001 (but not yet started) and those shown in Attachment B below.

Residents will be continue to be offered the option of having their rents based on the lesser of: 30% of their adjusted incomes (after Federally mandated deductions and a local optional deduction for FICA taxes withheld from wages/salaries) or Ceiling/Flat Rent amounts (set by bedroom size unit.) The Ceiling/Flat Rents are set at amounts substantially below the Section 8 Fair Market Rent (FMR) amounts for Muhlenberg County. All residents are expected to pay at least a minimum rent of \$50 per month. The HAG has retained its security deposit requirement at \$150 for new move-ins. Preferences use in the selection of new residents continue to be: first, those who work or live in Greenville; second, to those who work or live in Muhlenberg County but outside the City of Greenville, and third to "other working families" (those who are 62 years of age or are disabled receive the same preference as "working families"). The next (fourth) preference is to house the Elderly and Near Elderly in units that are designed for the Elderly/Handicapped before housing other eligible applicants there. The fifth preference is for those who are homeless or living in substandard housing. And a final preference is for victims of domestic violence. HAG believes that these policies are necessary to continue solvent operations and to show balance and fairly to all residents and applicants.

2. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions: Section 8 only PHAs are not required to complete this component.

A. ☒ Yes ☐ No: Is the PHA eligible to participate in the CFP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) Capital Fund Program grant for the upcoming year? \$95,200 (approximately same as the FFY2001 actual amount.)

C. ☒ Yes ☐ No Does the PHA plan to participate in the Capital Fund Program in the upcoming year? If yes, complete the rest of Component 7. If no, skip to next component.

D. Capital Fund Program Grant Submissions

(1) Capital Fund Program 5-Year Action Plan

The Capital Fund Program 5-Year Action Plan is provided as Attachment C

(2) Capital Fund Program Annual Statement

The Capital Fund Program Annual Statement is provided as Attachment B

3. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If “No”, skip to next component ; if “yes”, complete one activity description for each development.)

2. Activity Description

Demolition/Disposition Activity Description (Not including Activities Associated with HOPE VI or Conversion Activities)
1a. Development name:
1b. Development (project) number:
2. Activity type: Demolition <input type="checkbox"/> Disposition <input type="checkbox"/>
3. Application status (select one) Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application <input type="checkbox"/>
4. Date application approved, submitted, or planned for submission: <u>(DD/MM/YY)</u>
5. Number of units affected:
6. Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Relocation resources (select all that apply) <input type="checkbox"/> Section 8 for units <input type="checkbox"/> Public housing for units <input type="checkbox"/> Preference for admission to other public housing or section 8 <input type="checkbox"/> Other housing for units (describe below)
8. Timeline for activity: a. Actual or projected start date of activity: b. Actual or projected start date of relocation activities: c. Projected end date of activity:

4. Voucher Homeownership Program

[24 CFR Part 903.7 9 (k)]

- A. ☐ Yes ☒ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If “No”, skip to next component; if “yes”, describe each program

using the table below (copy and complete questions for each program identified.)

B. Capacity of the PHA to Administer a Section 8 Homeownership Program

The PHA has demonstrated its capacity to administer the program by (select all that apply):

- ☐ Establishing a minimum homeowner downpayment requirement of at least 3 percent and requiring that at least 1 percent of the downpayment comes from the family's resources
- ☐ Requiring that financing for purchase of a home under its section 8 homeownership will be provided, insured or guaranteed by the state or Federal government; comply with secondary mortgage market underwriting requirements; or comply with generally accepted private sector underwriting standards
- ☐ Demonstrating that it has or will acquire other relevant experience (list PHA experience, or any other organization to be involved and its experience, below):

5. Safety and Crime Prevention: PHDEP Plan

[24 CFR Part 903.7 (m)]

Exemptions Section 8 Only PHAs may skip to the next component PHAs eligible for PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

A. ☐ Yes ☒ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

B. What is the amount of the PHA's estimated or actual (if known) PHDEP grant for the upcoming year? \$ NOT APPLICABLE

C. ☐ Yes ☒ No Does the PHA plan to participate in the PHDEP in the upcoming year? If yes, answer question D. If no, skip to next component.

D. ☐ Yes ☐ No: The PHDEP Plan is attached at Attachment _____

6. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board (RAB) Recommendations and PHA Response

1. ☐ Yes ☒ No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s? *Only positive "attaboy" comments received.*

2. If yes, the comments are Attached at Attachment (File name)

3. In what manner did the PHA address those comments? (select all that apply)

- ☐ The PHA changed portions of the PHA Plan in response to comments
A list of these changes is included
 - ☐ Yes ☐ No: below or
 - ☐ Yes ☐ No: at the end of the RAB Comments in Attachment _____.
- ☐ Considered comments, but determined that no changes to the PHA Plan were necessary. An explanation of the PHA's consideration is included at the at the end of the RAB Comments in Attachment _____.
- ☒ Other: (list below) *Not applicable since no comments were received.*

B. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: (provide name here)

Commonwealth of Kentucky (State Plan)- Kentucky Housing Corporation

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply)

- ☐ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.
- ☐ The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.
- ☐ The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.
- ☒ Activities to be undertaken by the PHA in the coming year are consistent with specific initiatives contained in the Consolidated Plan. (list such initiatives below)
The Housing Authority will continue, as a part of our 5-Year Capital Improvements Program, to make physical improvements to offer a better living environment to all current and future residents. We will continue to offer affordable rents by offering residents the choice of Ceiling/Flat Rents and Income Based Rents, which provide required Federal deductions, and a deduction for FICA taxes withheld from wages. Every tenant will be expected to pay a minimum rent of \$50 per month. These actions will provide improved living conditions and housing opportunities for qualified low-income families.
- ☐ Other: (list below)

3. PHA Requests for support from the Consolidated Plan Agency

☐ Yes ☒ No: Does the PHA request financial or other support from the State or local government agency in order to meet the needs of its public housing residents or inventory? If yes, please list the 5 most important requests below:

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below) The State Consolidated Plan sets forth the following, with which the HAG's activities are consistent: "Expand the supply of safe, decent, sanitary and affordable housing for very-low and low-income families through ...rehabilitation...."

C. Criteria for Substantial Deviation and Significant Amendments

1. Amendment and Deviation Definitions

24 CFR Part 903.7(r)

PHAs are required to define and adopt their own standards of substantial deviation from the 5-year Plan and Significant Amendment to the Annual Plan. The definition of significant amendment is important because it defines when the PHA will subject a change to the policies or activities described in the Annual Plan to full public hearing and HUD review before implementation.

A. Substantial Deviation from the 5-year Plan:

The Housing Authority (HA) of Greenville has chosen the following as its definition of Substantial Deviation from its Annual Plan:

- 1.) Redirection of more than 25% of its operating budget funds from any budgeted/scheduled activity to another activity or:**
- 2.) A major change in program direction (e.g., new or different housing selection preference criterion, new or changes to deductions from income-based rents, additional efforts to enhance deconcentration opportunities, changes in the basis of determining Ceiling/Flat rent amounts, etc.) that requires action on the part of the Board of Commissioners; or**
- 3.) Increasing or decreasing the total number of HA employees by more than 50% from that authorized on the April 1st of each fiscal year.**

However, NONE of these changes will be considered a Substantial Deviation IF those changes result from Government (i.e., Federal, State, or Local) actions over which the HA exercises no control

B. Significant Amendment or Modification to the Annual Plan:

The HA has chosen to use the HUD definition of Significant Amendment or Modification. Specifically, it will consider the following to be such modifications/amendments:

- 1.) Changes to rent or admission policies or organization of its waiting list.**
- 2.) Additions of non-emergency work items (not included in the current Annual Statement or 5-Year Action Plan) or change in use of the replacement reserve funds under the Capital Grant Funds Program and**
- 3.) Any change with regard to demolition or disposition, designation of projects/buildings (for the elderly/disabled or families with disabilities), homeownership programs or conversion activities.**

However, NONE of these changes will be considered Substantial Amendments/Modifications IF those changes result from Government (i.e., Federal, State, of Local) actions over which the HA exercises no control.

Attachment A

Supporting Documents Available for Review

PHAs are to indicate which documents are available for public review by placing a mark in the “Applicable & On Display” column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
	State/Local Government Certification of Consistency with the Consolidated Plan (not required for this update)	5 Year and Annual Plans
X	Fair Housing Documentation Supporting Fair Housing Certifications: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions’ initiatives to affirmatively further fair housing that require the PHA’s involvement.	5 Year and Annual Plans
X	Housing Needs Statement of the Consolidated Plan for the jurisdiction/s in which the PHA is located and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O/ACOP), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
	Any policy governing occupancy of Police Officers in Public Housing <input type="checkbox"/> check here if included in the public housing A&O Policy	Annual Plan: Eligibility, Selection, and Admissions Policies
	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the method for setting public housing flat rents <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
	Section 8 rent determination (payment standard) policies <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Results of latest binding Public Housing Assessment System (PHAS) Assessment	Annual Plan: Management and Operations
X	Follow-up Plan to Results of the PHAS Resident Satisfaction Survey (if necessary)	Annual Plan: Operations and Maintenance and Community Service & Self-Sufficiency
	Results of latest Section 8 Management Assessment System (SEMAP)	Annual Plan: Management and Operations

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	Any required policies governing any Section 8 special housing types <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
	Section 8 informal review and hearing procedures <input type="checkbox"/> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for any active grant year	Annual Plan: Capital Needs
X	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grants	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans, or any other approved proposal for development of public housing	Annual Plan: Capital Needs
X	Self-evaluation, Needs Assessment and Transition Plan required by regulations implementing §504 of the Rehabilitation Act and the Americans with Disabilities Act. See, PIH 99-52 (HA).	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act, Section 22 of the US Housing Act of 1937, or Section 33 of the US Housing Act of 1937	Annual Plan: Conversion of Public Housing
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program (section _____ of the Section 8 Administrative Plan)	Annual Plan: Homeownership
X	Cooperation agreement between the PHA and the TANF agency and between the PHA and local employment and training service agencies	Annual Plan: Community Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
X	Section 3 documentation required by 24 CFR Part 135, Subpart E	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report	Annual Plan: Safety and Crime Prevention

List of Supporting Documents Available for Review		
Applicable & On Display	Supporting Document	Related Plan Component
	PHDEP-related documentation: <ul style="list-style-type: none"> · Baseline law enforcement services for public housing developments assisted under the PHDEP plan; · Consortium agreement/s between the PHAs participating in the consortium and a copy of the payment agreement between the consortium and HUD (applicable only to PHAs participating in a consortium as specified under 24 CFR 761.15); · Partnership agreements (indicating specific leveraged support) with agencies/organizations providing funding, services or other in-kind resources for PHDEP-funded activities; · Coordination with other law enforcement efforts; · Written agreement(s) with local law enforcement agencies (receiving any PHDEP funds); and · All crime statistics and other relevant data (including Part I and specified Part II crimes) that establish need for the public housing sites assisted under the PHDEP Plan. 	Annual Plan: Safety and Crime Prevention
X	Policy on Ownership of Pets in Public Housing Family Developments (as required by regulation at 24 CFR Part 960, Subpart G) <input checked="" type="checkbox"/> check here if included in the public housing A & O Policy	Pet Policy
X	The results of the most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
X	Other supporting documents Community Service Implementation Plan & the analysis of the "Required Initial Assessment of Voluntary Conversion of PH.."	Annual Plan

Required Attachment D: Resident Member on the PHA Governing Board

1. ☐ Yes ☒ No: Does the PHA governing board include at least one member who is directly assisted by the PHA this year? (if no, skip to #2)

A. Name of resident member(s) on the governing board:

B. How was the resident board member selected: (select one)?

☐ Elected

☐ Appointed

C. The term of appointment is (include the date term expires):

2. A. If the PHA governing board does not have at least one member who is directly assisted by the PHA, why not?

☐ the PHA is located in a State that requires the members of a governing board to be salaried and serve on a full time basis

☒ the PHA has less than 300 public housing units, has provided reasonable notice to the resident advisory board of the opportunity to serve on the governing board, and has not been notified by any resident of their interest to participate in the Board.

☐ Other (explain):

B. Date of next term expiration of a governing board member: 12/2002

C. Name and title of appointing official(s) for governing board (indicate appointing official for the next position): Mayor Ruth Lewis

Required Attachment __E____: Membership of the Resident Advisory Board or Boards

List members of the Resident Advisory Board or Boards: (If the list would be unreasonably long, list organizations represented or otherwise provide a description sufficient to identify how members are chosen.)

Ms. Marion Cyr (734 Lowell Drive) and Ms. Christine Bard (610 Reynolds Drive)

Required Attachment F. Component 3, (6) Deconcentration and Income Mixing

- a. ☐ Yes ☒ No: Does the PHA have any general occupancy (family) public housing developments covered by the deconcentration rule? If no, this section is complete. If yes, continue to the next question. *Greenville is a small PHA with less than 100 dwelling units.*
- b. ☐ Yes ☐ No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete.

If yes, list these developments as follows:

Deconcentration Policy for Covered Developments			
Development Name:	Number of Units	Explanation (if any) [see step 4 at §903.2(c)(1)(iv)]	Deconcentration policy (if no explanation) [see step 5 at §903.2(c)(1)(v)]

Required Attachment G. Component 10(B) Voluntary Conversion Initial Assessments

- a. How many of the PHA's developments are subject to the Required Initial Assessments? *The one and only development (project) owned by this PHA.*
- b. How many of the PHA's developments are not subject to the Required Initial Assessments based on the exemptions (e.g., elderly and/or disabled developments not general occupancy projects)? *Not Applicable*
- c. How many Assessments were conducted for the PHA's covered developments? *ONE*
- d. Identify PHA developments that may be appropriate for conversion based on the Required Initial Assessments: *NONE*

Development Name	Number of Units

- e. If the PHA has not completed the Required Initial Assessments, describe the status of these assessments: *Not Applicable*

Annual Statement/Performance and Evaluation Report Attachment B
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part I: Summary

PHA Name: Housing Authority of Greenville	Grant Type and Number Capital Fund Program Grant No: KY36P10050102 Replacement Housing Factor Grant No:	Federal FY of Grant: 2002
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☒ Original Annual Statement ☐ Reserve for Disasters/ Emergencies ☐ Revised Annual Statement (revision no:)
☐ Performance and Evaluation Report for Period Ending: ☐ Final Performance and Evaluation Report

Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 9,000.			
8	1440 Site Acquisition				
9	1450 Site Improvement				
10	1460 Dwelling Structures	\$ 86,200.			
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$ 95,200.			
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures	\$ 38,000.			

Annual Statement/Performance and Evaluation Report Attachment B
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

[illegible]

Annual Statement/Performance and Evaluation Report Attachment B
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule

[illegible]

Capital Fund Program Five-Year Action Plan Attachment C

Part I: Summary

PHA Name Housing Authority of Greenville				<input checked="" type="checkbox"/> Original 5-Year Plan <input type="checkbox"/> Revision No:	
Development Number/Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2003 PHA FYB: 4-01-03	Work Statement for Year 3 FFY Grant: 2004 PHA FYB: 4-01-04	Work Statement for Year 4 FFY Grant: 2005 PHA FYB: 4-01-05	Work Statement for Year 5 FFY Grant: 2006 PHA FYB: 4-01-06
KY 100-01, Westside Terrace	Annual Statement	\$ 96,200.	\$ 96,200.	\$ 96,200.	\$ 96,200.
CFP Funds Listed for 5-year planning		\$ 96,200.	\$ 96,200.	\$ 96,200.	\$ 96,200.
Replacement Housing Factor Funds					

Capital Fund Program Five-Year Action Plan Attachment C
Part II: Supporting Pages—Work Activities

Activities for Year 1	Activities for Year : <u>2</u> FFY Grant: 2003 PHA FY: 4-01-03			Activities for Year: <u>3</u> FFY Grant: 2004 PHA FYB: 4-01-04		
	Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
See Annual Statement						
	KY 100-01, Westside Terrace	Balance to fund HVAC installations	\$ 15,800.	KY 100-01, Westside Terrace	Conversion of 5 BR unit into Two 2 BR units	\$ 60,000.
		Reroof remaining bldgs.	\$ 61,000.		Computer Upgrades	\$ 10,000.
		Fees & Costs- A &E & Mod Mgmt. Consultant	\$ 9,200.		Fees & Costs- A &E & Mod Mgmt. Consultant	\$ 12,000.
		Operations-support Operating Budget	\$ 10,200.		Operations-support Operating Budget	\$ 14,200.
	Total CFP Estimated Cost			\$ 96,200.		\$ 96,200.

Capital Fund Program Five-Year Action Plan Attachment C
Part II: Supporting Pages—Work Activities

Activities for Year : _4_ FFY Grant: 2005 PHA FYB: 4-01-05			Activities for Year: _5_ FFY Grant: 2006 PHA FYB: 4-01-06		
Development Name/Number	Major Work Categories	Estimated Cost	Development Name/Number	Major Work Categories	Estimated Cost
KY 100-01, Westside Terrace	Add total of 74 Phone Jacks to the 50 dwelling units	\$ 3,700.	KY 100-01, Westside Terrace	Replace large Riding Mower	\$ 15,000.
	Replace Bathroom Laboratory faucets	\$ 10,800.		Replace smaller mowing & trimming equipment	\$ 1,000.
	Replace ½ ton Pickup Truck	\$ 20,000.			
	Fees & Costs- A & E and Mod Mmgt. Consultant	\$ 2,200.		Operations-support Operating Budget	\$ 80,200.
	Operations- support Operating Budget	\$ 59,500.			
Total CFP Estimated Cost		\$ 96,200.			\$ 96,200.

Annual Statement/Performance and Evaluation Report Required Attachment H
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part I: Summary

PHA Name: Housing Authority of Greenville		Grant Type and Number Capital Fund Program Grant No: KY36P10050101 Replacement Housing Factor Grant No:		Federal FY of Grant: 2001	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9-30-01 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 11,190.	\$ 11,190.	-0-	-0-
8	1440 Site Acquisition				
9	1450 Site Improvement	-0-	\$ 34,000.	-0-	-0-
10	1460 Dwelling Structures	\$ 83,996.	\$ 49,996.	-0-	-0-
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures				
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$ 95,186.	\$ 95,186.	-0-	-0-
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report Required Attachment H
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Housing Authority of Greenville		Grant Type and Number Capital Fund Program Grant No: KY36P10050101 Replacement Housing Factor Grant No:				Federal FY of Grant: 2001		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
KY 100-01, Westside Terrace	FEES AND COST	1430						
	a. A & E Design		1	\$ 6,000.	\$ 6,000.	None	None	To Be done
	b. Mod Consultant		1	\$ 4,500.	\$ 4,500.	None	None	To be done
	c. Advertisement		LS	\$ 690.	\$ 690.	None	None	To be done
	SITE IMPROVEMENTS	1450						
	a. Landscaping.		LS	-0-	\$ 14,000.	None	None	To be done
			LS	-0-	\$ 20,000.	None	None	To be done
	DWELLING STRUCTURES	1460						
	a. Roof Turbines		100	-0-	\$ 5,000.	None	None	To be done
	b. Replace Water Heaters		50	-0-	\$ 20,000.	None	None	To be done
	c. New Roof Shingles		4 buildings	-0-	\$ 15,000.	None	None	To be done
	d. Replace Gas Flue Vents		50 DUs	-0-	\$ 9,996.	None	None	To be done
	e. HVAC System (continuation), including addt'l duct work for some		As many as possible	\$ 83,996.	-0-	None	None	Delayed

**Annual Statement/Performance and Evaluation Report Required Attachment H
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule**

[illegible]

Annual Statement/Performance and Evaluation Report Required Attachment H
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part I: Summary

PHA Name: Housing Authority of Greenville		Grant Type and Number Capital Fund Program Grant No: KY36P10050100 Replacement Housing Factor Grant No:		Federal FY of Grant: 2000	
<input type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters/ Emergencies <input checked="" type="checkbox"/> Revised Annual Statement (revision no: 1) <input checked="" type="checkbox"/> Performance and Evaluation Report for Period Ending: 9-30-01 <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non-CFP Funds				
2	1406 Operations				
3	1408 Management Improvements				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	\$ 9,329.	\$ 9,329.	\$ 5,652.10	\$ 2,452.10
8	1440 Site Acquisition				
9	1450 Site Improvement	\$ 1,350.	\$ 4,350.	\$ -0-	\$ -0-
10	1460 Dwelling Structures	\$ 82,611.	\$ 59,611.	\$ 4,616.20	\$ 4,616.20
11	1465.1 Dwelling Equipment—Nonexpendable				
12	1470 Nondwelling Structures	\$ -0-	\$ 20,000.	\$ -0-	\$ -0-
13	1475 Nondwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1501 Collateralization or Debt Service				
20	1502 Contingency				
21	Amount of Annual Grant: (sum of lines 2 – 20)	\$ 93,290.	\$ 93,290.	\$ 10,268.30	\$ 7,068.30
22	Amount of line 21 Related to LBP Activities				
23	Amount of line 21 Related to Section 504 compliance				
24	Amount of line 21 Related to Security – Soft Costs				
25	Amount of Line 21 Related to Security – Hard Costs				
26	Amount of line 21 Related to Energy Conservation Measures				

Annual Statement/Performance and Evaluation Report Required Attachment H
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part II: Supporting Pages

PHA Name: Housing Authority of Greenville		Grant Type and Number Capital Fund Program Grant No: KY36P10050100 Replacement Housing Factor Grant No:				Federal FY of Grant: 2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost		Total Actual Cost		Status of Work
				Original	Revised	Funds Obligated	Funds Expended	
KY 100-01, Westside Terrace	FEES & COST	1430						
	a. A & E Design		1	\$ 5,329.	\$ 5,329.	\$ 1,652.10	\$ 1,652.10	On-going
	b. Mod Consultant		1	\$ 4,000.	\$ 4,000.	\$ 4,000.00	\$ 800.00	On-going
	SITE IMPROVEMENTS	1450						
	a. Handrails			\$ 1,350.	\$ 1,350.	\$ -0-	\$ -0-	To be done
	b. Security Lighting			\$ -0-	\$ 3,000.	\$ -0-	\$ -0-	To be done
	DWELLING STRUCTURES	1460						
	a. HVAC Systems			\$ 38,390.	\$ 33,774.	\$ -0-	\$ -0-	To be done
	b. Upgrade Electrical Services			\$ -0-	\$ 20,221.	\$ -0-	\$ -0-	To be done
	c. Mail Boxes			\$ -0-	\$ 1,000.	\$ -0-	\$ -0-	To be done
	c. Floor repair-floor tile			\$ 44,221.	\$ 4,616.	\$ 4,616.20	\$ 4,616.20	Completed, most in earlier CFPs
	NONDWELLING STRUCTURES	1470						
	Renovate Office & Maintenance			\$ -0-	\$ 20,000.	\$ -0-	\$ -0-	To be done

**Annual Statement/Performance and Evaluation Report Required Attachment H
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF)
Part III: Implementation Schedule**

[illegible]

Required Attachment I. Report on the Progress in Meeting the Five-Year Mission/Goals

The Housing Authority of Greenville (HAG) believes that it has fulfilled its mission of providing decent, safe and affordable housing, in a non-discriminatory manner, to its clientele. Additionally, it believes that it has made substantial progress in meeting its three (3) Five-Year Goals. Details of these actions/accomplishments are:

1. The HAG did increase the number (and percentage) of working families comprising its resident body. The number of working families increased from six (6) to nine (9) during the past 12 months. Its goal was to increase by 1 more (or 2%) working family from those in occupancy as of October 17, 2000. This was accomplished while the HAG still admitted 8 of 10 new residents whose incomes were in the extremely low-income range (i.e., <30% of the Median Family Income for Muhlenberg County.)
2. HAG has improved living conditions through Capital Fund and Operating Budget expenditures. Specific additions and improvements are: new vinyl exterior siding, ceiling fans, new floor tile, new ranges and refrigerators, and some landscaping improvements. Thus, HAG believes it has improved the living environment for its current and future residents.
3. While the Calendar Year (CY) 2001 HUD REAC Customer Services and Satisfaction Survey results were not available at this writing, we believe that improvements in the area of "Safety", where the HAG scored 70% on the first such survey, have been made. This is also the opinion of the two member Resident Council and the Chief of Police. The Executive Director and the Resident Council members have met twice thus far in the current fiscal/agency plans year to discuss various issues, including crime and safety.